# INDIANA STATE DEPARTMENT OF HEALTH MATERNAL AND CHILD HEALTH DIVISION

# Appendix A BABY & ME Tobacco Free™ Service Standard

# **Program Description**

The Indiana State Department of Health seeks to fund local agencies to implement the BABY & ME Tobacco Free<sup>TM</sup> program. BABY & ME<sup>TM</sup> Tobacco Free (BMTF) Program is an evidence-based tobacco cessation program for pregnant women though her child's first birthday. For more information, go to http://www.babyandmetobaccofree.org/

BMTF collaborates with local and state agencies that provide prenatal and postpartum services to pregnant women and their qualifying support partners. At the first appointment, the participant receives information about the program and an initial intake session is held. Each participant receives at least four prenatal cessation-counseling sessions, support, and carbon monoxide (CO) monitoring and/or saliva testing, usually during a regular prenatal visit. The participant may qualify for up to 2 diaper vouchers prenatally, at sessions three and four.

After the birth of the baby, the participant returns monthly to continue biochemical monitoring and, if proven to be nicotine-free, receives a \$25 monthly voucher for diapers for up twelve months postpartum. The participant may use her voucher for any brand or size of diapers at local participating stores.

#### **Provider/Staff Qualifications**

A competent staff is vital to the success of the BABY & ME Tobacco Free<sup>TM</sup> program. Each site has the ability to integrate the program in the departments or areas of their organization that best serve the participants.

A specialized facilitator, is trained and certified by the national program office. The facilitator must possess a bachelor's degree in health, health education, nursing, social work, public health or a related field, or be able to document previous experience in tobacco cessation work. A one-day training class, available through training and technical assistance opportunities provided by ISDH MCH, provides agencies and facilitators with the information and materials necessary to implement and enroll women in BABY & ME Tobacco Free<sup>TM</sup>.

The grantee will send at least one representative annually to a BMTF training classes held in centralized locations in Indiana at various times throughout the year. Expenses for travel are allowable and may be included in the proposed budget. Following the training, the attendee must successfully pass the BMTF Facilitator Certification exam. This certification is good for two years and must be renewed on or before expiration.

#### **Outreach:**

Outreach to pregnant women who smoke is a priority as Indiana seeks to reduce infant mortality and morbidity rates. Partnerships with local agencies that can publicize the program and refer participants will increase outreach potential and are necessary for success. Outreach activities include marketing and attendance at local events where pregnant families may be and are vital to the program achieving maximum potential.

A minimum of one outreach activity is required quarterly and plans for such must be included in the application narrative.

### **Required Components of Service or Program**

Eligible Population

Eligible participants are pregnant women residing in Indiana who currently smoke or who were a daily smoker three months prior to becoming pregnant. There is no age or income eligibility requirement for enrolling in the program.

One qualified partner may also enroll and remain in the program as long as the primary participant (pregnant/postnatal woman) continues to attend all pre and postnatal sessions. Per the BMTF model, qualified support partners include individuals who reside with the pregnant woman and who currently using tobacco.

#### Enrollment

Pregnant women and their qualified support partners that meet the criteria for the program are referred by their physician, obstetric/prenatal clinic, or other entity to the local BABY & ME Tobacco Free<sup>TM</sup> program site. At enrollment, the program is explained to the participant, and the participant may choose to enter into the program by signing and dating a Participant Agreement form. The participant and the facilitator work together to also complete a Client Registration form, collecting demographics and a history of tobacco use, establishing a baseline carbon monoxide and/ or nicotine level through biochemical testing, and setting a timeline for a quit date and the three remaining prenatal sessions. At this time, a Quitline referral is also made as an integral component of BMTF participation. The first session also includes education that details the benefits of tobacco cessation, as well as preparation materials for a successful quit attempt.

#### **Process**

Each participant receives at least three additional prenatal cessation-counseling sessions, for a total of four prenatal appointments prior to birth. Education, support, and biochemical testing with either a carbon monoxide monitor or saliva testing occur at each visit. The participant may qualify for up to two diaper vouchers prenatally, one each at sessions three and four, if they are tobacco-free as verified biochemically.

Improved birth outcomes occur when the mother stops smoking earlier in her pregnancy. If a woman is interested in enrolling in her third trimester, the facilitator should evaluate the advisability of enrollment by asking: 1.) When did you first hear about the BMTF program? 2.) Are you still smoking at this time? 3.) Why are you choosing to enroll now?

The pregnant woman who found out about the BMTF program only in her third trimester must enroll by a date that allows a reasonable amount of time for all four prenatal sessions to be

completed prior to delivery. Ideally, enrollment should occur prior to 32 weeks gestation, with 36 weeks gestation being the absolute latest a pregnant woman could be eligible to enroll, which would allow only one week in between each of the four prenatal sessions.

Women who have quit smoking and have made good faith effort to complete all four prenatal session classes before delivery, but are unable to complete all four sessions because of circumstances beyond their control (preterm delivery, bed rest, etc.) may be permitted to complete their fourth session after delivery. These exceptions must be discussed with ISDH MCH and the national BMTF office at time of enrollment.

After the birth of the baby, the participant returns monthly to continue biochemical testing and, if proven to be tobacco-free, receives a \$25 monthly voucher for diapers for up twelve months postpartum. The participant may use her voucher for any brand or size of diapers at local participating stores.

Diaper vouchers are ordered, printed, and tracked through the national BMTF program office. Sites will calculate their voucher need, and then that allotment of vouchers will be set aside at the program office for the site. Estimate of vouchers must be included in application narrative.

An annual site visit will be conducted by one or more ISDH MCH staff within the grant period. During this visit, the grantee will be asked to present current program activities, emerging issues, outreach efforts, and data. Additionally, one time during the grant cycle each site will be asked to attend an Indiana BMTF meeting with other grantees. This meeting will allow grantees to network, learn from others and provide insight to ISDH MCH for the Title V Needs Assessment. Expenses for travel are allowable and may be included in the proposed budget.

## **Data Collection Methods/Reporting**

The grantee will provide data at least monthly to the national BMTF program office. The grantee will input data into the BMTF portal in a timely manner, no later than two weeks of seeing the participant. The grantee will utilize the BMTF data portal system to:

- Record participant enrollment and retention
- Report biochemical testing at every visit
- Enter participant demographics
- Track birth outcomes
- Voucher accountability and tracking

In addition, the grantee will be asked to submit data to ISDH MCH on a quarterly basis. Reports are due fifteen days following the conclusion of each quarter. The following data points are required to capture participation of each woman and partner enrolled:

- Demographic information
- Number of women who have attended each session (i.e. Prenatal 1, Prenatal 2, Prenatal 3...Postpartum 11, Postpartum 12)
- Number of vouchers dispersed
- Number of women lost to follow up

The grantee is required to implement a standardized process for data collection that meets the requirements for data reporting.

#### **Expected Outcomes**

The primary goal of Baby and Me Tobacco Free<sup>TM</sup> is to reduce the burden of tobacco and its impact on infant and maternal mortality and morbidity and to optimize the health of new mothers and their families.

Linking the BMTF program to the reduction of Indiana infant mortality and morbidity is the key aim of the MCH Division. Therefore, it is important to note goals that ISDH MCH has set for itself so that grantees can get a sense of the larger aim:

- Decrease the infant 2016 mortality rate to 6.7% by 2020
- Decrease the number of pregnant women who smoke throughout their pregnancy
- Decrease the percent of women who smoke during pregnancy to less than 10% by 2020
- Increase the number of women who quit smoking while pregnant that remain nicotine-free at six months postpartum
- Increase the number of homes that are free of second and third-hand smoke
- Decrease the percent of children who live in households where someone smokes to less than 20% by 2020
- Decrease the number of infants who are born prior to 37 weeks gestation
- Decrease the number of women who are low birth weight (less than 2500g)

BMTF Providers are required to track progress towards objective performance measures that will be developed for all providers, potential measures include:

- Measure 1: BMTF will provide education about the dangers of tobacco use for pregnant women to 100% of participants
- Measure 2: At least 75% of all enrolled program participants will remain in the program until 1 year following the birth of the child.
- Measure 3: At least 75% of program participants that remain in the program for 1 year following the birth of the child will test tobacco free at the last appointment